Docket No.: 3350-31F File No. 1158.41324CC6 Client No.: BillPay-F

OTPE CITY

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inste Application of

KIGHT, et al.

: Art Unit: 3625

Serial No: 09/540,011

: Examiner: Y. Garg

Filed: March 31, 2000

For: BILL PAYMENT SYSTEM AND METHOD WITH A MASTER MERCHANT

## **TRANSMITTAL**

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

RECEIVED

APR 0 5 2004

April 1, 2004

Sir:

**GROUP 3600** 

Transmitted herewith is a Request for Reconsideration in the above-identified application.

[X] No additional fee is required.

[] Also attached:

The fee (if applicable) has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	20	20	0	x \$18 =	\$0
Independent Claims	3	3	0	x \$86 =	\$0
TOTAL FEE DUE					\$0

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- [] A Credit Card Payment form in the amount of \$0 is attached
- [X] Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment, to Deposit Account No. 01-2135, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully Submitted,

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